

**Mississippi Trauma Advisory Committee
Edison Walthall Hotel
Jackson, MS
Minutes**

November 9, 2000

MTAC Members Present:

William T. Avara, M.D.	Jerry Green
John Brahan, M.D.	John Lucas, M.D.
David Cook, R.N.	Charles Pigott, M.D.
John Cook, M.D.	Galen Poole, M.D.
Rodney Frothingham, M.D.	Marshall Tucker
Hugh Gamble, M.D.	Wells Wilson, M.D.
Michael Gandy (for Bob McDonald)	Christine Weiland, R.N.

MTAC Members Not Present:

John Nelson, M.D.
Lucy Cumbest, R.N.
Brennett Lyles, R.N., REMT-P

Others Present:

Janice Conerly
Wade N. Spruill, Jr.
Ellen O'Neal
Amber Kyle
Ricky Boggan
Ingrid Williams
Jonathan Chaney
Frank Ehrlich, M.D.

EMS Staff Present:

Austin Banks
Beth Nation
Keith Parker
Fran Dickie
Chuck Carter
Dave Kuchta

I. Call to Order:

A. Meeting was called to order by Dr. Gamble at 10:30 A.M.

II. Adoption of Minutes:

A. Minutes from August 10, 2000 MTAC meeting were adopted by acclamation.

III. Reports:

- A. Central Trauma Care Region - Dr. Cook
 - 1. One Level III applicant hospital has been inspected..
 - 2. Central Mississippi Medical Center decided not to participate in the Trauma System and withdrew their request to be inspected as a Level III Trauma Center.
- B. North Trauma Care Region - Dr. Piggott
 - 1. Hired a Regional Trauma Nurse Coordinator
 - 2. Performing audits in Level IV applicant hospitals
- C. Coastal Trauma Care Region - Dr. Avara
 - 1. Regional Plan near completion.
 - 2. Recruiting for Regional Director
- D. Southeast Trauma Care Region - Dr. Brahan
 - 1. The Region is getting good feedback related to the Trauma System from participating hospitals.
- E. Delta Trauma Care Region - Dr. Lucas
 - 1. Level IV applicant hospitals are preparing for inspection.
 - 2. The Region is utilizing administrative funds for education opportunities with participating hospitals.
- F. Southwest Trauma Care Region - Dr. Wilson
 - 1. Level IV applicant hospitals are preparing for inspection.
- G. East Central Trauma Care Region
 - 1. Still waiting for Governor appointment of Regional Representative to MTAC.
 - 2. Regional Plan near completion.
 - 3. Meridian hospital showing interest in participating in the Trauma System.

IV. Old Business:

- A. Level IV Inspection Schedule
 - 1. Discussed Level IV Inspection schedule which begins November 16, 2000 and concludes on December 15, 2000.
 - 2. Discussion regarding alternatives for Level IV hospitals that do not pass initial inspection.
 - a. Motion: In the event that a Level IV applicant hospital fails a Trauma Center designation inspection, the applicant hospital will be given up to six months to correct major deficiencies. The applicant hospital will then be re-inspected for Level IV Trauma Center designation.

- b. Motion by Mr. Tucker, Second by Avara, Motion passed without dissension.

B. Registry Inclusion Criteria

- 1. Discussion regarding the inclusion of burn patients in the Trauma Registry.
 - a. The Trauma Registry will be updated to include fields for collecting burn specific data.
 - b. Hospital will begin collection of burn data upon completion of update which should occur in January 2001.

V. New Business:

A. Dr. Frank Ehrlich's Resignation

- 1. Dr. Ehrlich resigned as consultant to the Mississippi Trauma Care System.
- 2. Dr. Tom Espisito has agreed to become the trauma surgeon consultant with the Mississippi Trauma Care System.

B. Anesthesia Regulation Clarification

- 1. Discussion regarding wording of the Anesthesia regulation requiring "in-house" anesthesia in a Level II Trauma Center.
- 2. The motion was to remove the words "in-house" from the regulation and for it to read, "Anesthesia must be available 24 hours/day with a mechanism established to ensure notification of the on-call anesthesiologist."
- 3. Motion made by Dr. Piggott, Second by Dr. Lucas, Motion passed without dissension.

C. Trauma Surgeon Dedication in Level II Trauma Centers.

- 1. Discussion regarding the regulation requiring the Trauma Surgeons in a Level II Trauma Center to be dedicated to one hospital.
- 2. Motion made to change regulation to read, "There must be a back-up surgeon schedule published. It is desirable that the surgeon on-call be dedicated to the trauma center and not on-call to any other hospital while on trauma call. A mechanism must be established to ensure notification of the back-up surgeon when the primary surgeon is not available to the trauma center. A system must be developed to assure notification of the on-call surgeon and compliance with these criteria and their appropriateness must be documented and monitored by the PI process."
- 3. Motion made by Dr. Avara, Second by Dr. Piggott, Motion passed without dissension.

D. Discussion of Confidential Session under §41-63-1

1. Dr. Gamble reads the Confidential Session rule prior to discussion of Trauma Inspection reports.

E. Discussion of Recusal Rule

1. Dr. Gamble reads Recusal Rule prior to discussion of Trauma Inspection reports.

F. MTAC enters Confidential Session at 11:40

G. MTAC exits Confidential Session at 1:45

H. Discussion of next MTAC Meeting

1. Request from Dr. Gamble to change meeting time to 1:00 p.m.
2. Request has no opposition.

VI. Adjourn: Meeting adjourned at 1:50 P.M.